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**From:** Name: Nisan A. Steinberg, Ph.D.

Voice Phone: 213-896-6665

**To:** Name: Examiner Sorbello Art Unit 1633

Company:

Facsimile #: 703 746 5090 Re: 09

Voice Phone:

Subject:

**Message:**

Per your request attached is a copy of Response to Supplemental Office Action filed by Applicant on November 1, 2001. References cited in ISR (issued 4/26/02) of corresponding PCT application will be sent in Supplemental IDS as soon as possible.

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Date:	05/20/02	Time:	01:48 PM	No. Pages (Including Cover):	8
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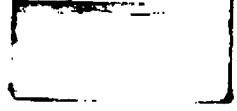
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05/20/02 2:20: PAGE 002/8 RightFAX

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Please acknowledge receipt of the accompanying:

Document(s):

(1) Amendment Transmittal Letter; and  
(2) Response to Office Action (mailed August 1, 2001)

Applicant(s) Name: Black et al.

Serial Number: 09/491,500

Filing Date: January 26, 2001

Title: Method for Using Potassium Channel Agonists for Delivering a  
Medicant to an Abnormal Brain Region and/or a Malignant Tumor

Certificate of Mailing

Fee: \$ none

Our Docket No. 18810-80645

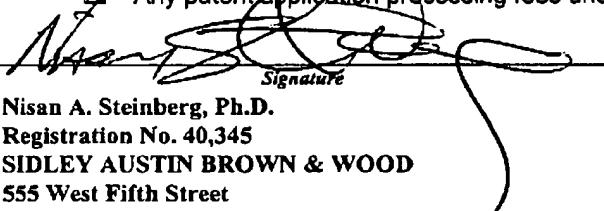
Date Mailed: 11/01/01 Date Due: November 1, 2001

Client: Cedars-Sinai Medical Center

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<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>				Docket No. P07 43453 (18810-80645)	
Applicant(s): Black et al.					
Serial No. 09/491,500	Filing Date January 26, 2000	Examiner Sorbello, E.		Group Art Unit 1633	
<b>Invention: METHOD FOR USING POTASSIUM CHANNEL AGONISTS FOR DELIVERING A MEDICANT TO AN ABNORMAL BRAIN REGION AND/OR A MALIGNANT TUMOR</b>					
<b><u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u></b>					
Transmitted herewith is an amendment in the above-identified application.					
<input checked="" type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted. <input type="checkbox"/> A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	44 -	109 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	4 -	8 =	0 x	\$42.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1597 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
Dated: November 1, 2001					
 Signature Nisan A. Steinberg, Ph.D. Registration No. 40,345 SIDLEY AUSTIN BROWN & WOOD 555 West Fifth Street Los Angeles, CA 90013-1010 Ofc: 213/896-6665 Fax: 213/896-6600					
I certify that this document and fee is being deposited on 11/01/01 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.  Signature of Person Mailing Correspondence Ann Weiss Typed or Printed Name of Person Mailing Correspondence					
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